

Cervical cancer is the number one cancer killer of women in sub-Saharan Africa (SSA), with roughly 100,000 women diagnosed annually; of these women, about 62% will die from the disease. Women living with HIV (WLHIV) are up to five times more likely to develop persistent precancerous lesions and progress to cervical cancer, often with more aggressive form and higher mortality.

Launched in May 2018 to address this challenge, Go Further is an innovative public-private partnership between the U.S. President's Emergency Plan for AIDS Relief (PEPFAR), the George W. Bush Institute, the Joint United Nations Programme on HIV/AIDS (UNAIDS), and Merck. The partnership collaborates closely with governments to strategize on ways to provide services for women from prevention through the cancer journey. Go Further began working in eight countries (Botswana, Eswatini, Lesotho, Malawi, Mozambique, Namibia, Zambia, and Zimbabwe), and will expand services to four additional countries (Ethiopia, Kenya, Tanzania, Uganda) in fiscal year (FY) 2021. The objectives are to screen all WLHIV on ART between the ages of 25 and 49 for cervical cancer, and to treat pre-invasive cervical cancer lesions to prevent progression to cervical cancer.

## Country Context

Total Population  
(July 2020 est.)  
(World Factbook)

**2,317,233**

Women Aged 15-49  
HIV Prevalence Rate  
(UNAIDS 2019)

**24.6%**

Age-standardized  
Incidence Rate (per 100,000) of  
Cervical Cancer Cases  
Attributable to HPV  
(Estimates for 2018)  
(HPV Information Center)

**31.6**

Total # of Women  
(All Ages) On ART  
(PEPFAR, FY20 Q2)

**97,022**

## Botswana Program Highlights

Botswana	Funding Amount	WLHIV on Treatment*	Cervical Cancer Screening Target
FY19	\$2,200,000	50,000	25,000
FY20	\$997,630	64,788	32,396
FY21	\$1,000,000	70,961	32,393

\* For FY19, this is the number of women aged 30+ estimated to be on treatment; otherwise, this is women aged 25-49 on treatment at the end of FYs 18 and 19, respectively.  
(Source: PEPFAR Panorama Spotlight)

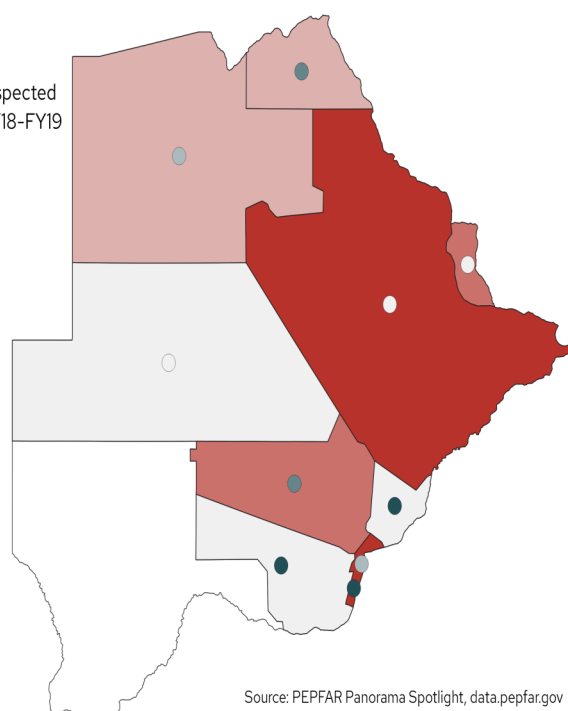
Botswana: Cervical cancer screenings and positives (precancerous lesions or suspected invasive cervical cancer), FY18-FY19

Percent of WLHIV on ART (15+) who were screened and received results positive for precancerous lesions or positive for suspected invasive cervical cancer

- 0% - 7%
- 7% - 11%
- 11% - 13%
- 13% - 16%

WLHIV (15+) on ART screened for cervical cancer

- 0 - 448
- 448 - 796
- 796 - 3,013
- 3,013 - 6,393



Source: PEPFAR Panorama Spotlight, data.pepfar.gov

## RESULTS SUMMARY

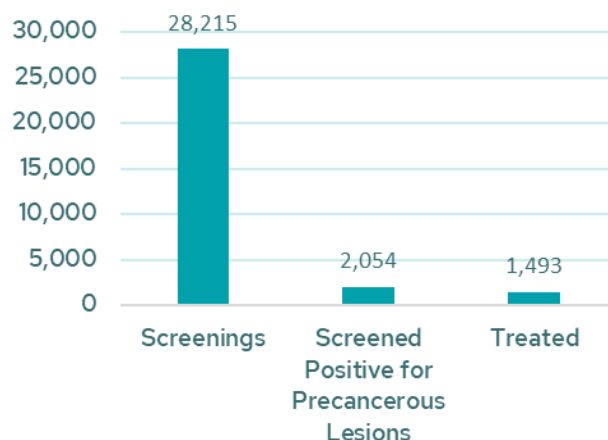
- ◆ In FY20: 10,431 screenings were done, representing 32% of the FY20 target, and 65% of women who screened positive for precancerous lesions were treated.
- ◆ Since FY18: 195 women have screened positive for suspected invasive cervical cancer. Of the 28,215 screenings, 16,064 (56.9%) were first time screenings, 758 (2.7%) were follow-up screenings, and 11,393 (40.4%) were re-screens.

## Strategic Direction for FY21

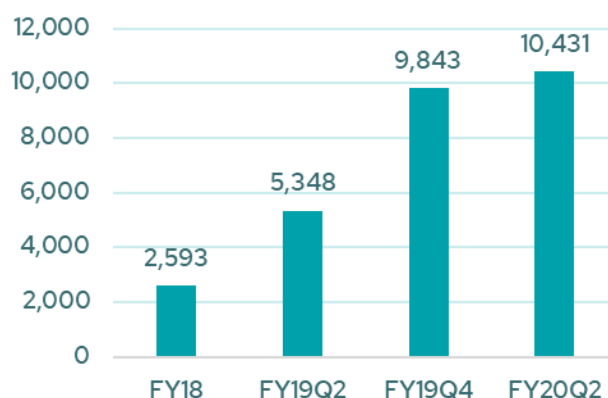
- ◆ In FY21, training of service providers for screening and treatment will be decentralized. District-level trainings are cost-effective and enable a wider pool of service providers to participate and minimize the impact of transfers and attrition.
- ◆ Five screening hubs will be added to the existing sites and at least ten screening spokes will be added to the screening sites network to increase availability of services and ease access for WLHIV in surrounding areas. Partner performance will be monitored through weekly tracking of performance indicators and the use of continuous quality improvement approach to improve program performance.
- ◆ PEPFAR Botswana's cervical cancer program will introduce thermocoagulation technique as a treatment option in high volume ART sites and support HPV DNA testing innovations for cervical cancer screening through self-collection for HPV DNA testing in Kweneng East and Gaborone districts.



## Cervical Cancer Cascade



## # of Cervical Cancer Screenings



## Implementing Partners (FY20)

- ◆ Jhpiego